S HOUSE O	Form A For Use by Members, Officers, and	ers, and Employees 2019 (Office yespons): 55
Name: Wm LACK CLAY D.	Daytime Telephone: <u>えのようみん</u> て	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
FILER Mamber of tha U.S. Stata: 140 STATUS House of Representatives District:	Officar or Employae	Employing Office: Staff Filer Type: (If Applicabla) Shared Principal Assistan
REPORT 2018 Annual (Due: May 15, 2019)	Amendment	Termination Data of Tarminetion:
PRELIMINARY INFORMATION ANSWER EACH OF THESE O	QUESTIONS	
A. Did you, your spouse, or your dependent child: a. Own any reportabla asset that was worth more than \$1,000 at the and of tha reporting period? Or b. Raceiva mora than \$200 in unaamad income from eny raportabla asset during the reporting period?	8 	F. Did you hava any reportable agreemant or arrangamant with an outsida antity during the raporting pariod or in tha currant calendar yaar up through the data of filing?
B. Did you, your spouse, or your dapendant child purchasa, sall, or exchanga any sacurities or reportabla real astata in a transaction Yas exceeding \$1,000 during the reporting period?	No Source during the reporting period?	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in valua from a singla source during tha reporting pariod?
C. Did you or your spousa hava "aarnad" Incoma (a.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yea X-reporting pariod?	No H. Did you, your sp reportable treval or \$390 in valua from	ouse, or your dapendant child recaiva any raimbursaments for traval totaling mora than a single source during the reporting period?
D. Did you, your spousa, or your dependant child have any reportable Yea lability (more than \$10,000) at any point during the reporting period?	No leu of paying you for a speach reporting period?	I. Did any individual or organization maka a donation to charity in lieu of paying you for a speach, appaaranca, or articla during tha reporting period?
E. Did you hold any reportable positions during the reporting period or in the current celendar year up through the data of filing?	ш	CORRESPONDING SCHEDULE IF YOU ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -	-	ANSWER EACH OF THESE QUESTIONS
IPO - Did you purchasa any shares that were allocated as a part of an Initial Public Offering during the reporting period? If y contact the Committee on Ethics for further guidance,	Mering during the reporting period? If you answer	ou answarad "yas" to this quastion, please
TRUSTS — Details regarding "Quaffiad Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report datails of such a trust that benafits you, your apousa, or dapendant child?	Ethics and certain other "excepted trusts" need not uild?	be disclosed. Have you excluded
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spourell threa tests for axamption? Do not answar "yes" unless you hava first consultad with the Committee on Ethics.	es of a spour	se or your dependant child because they meet

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Page 7 of 6

2	111	21	ca	7	100		JT Ехатрівя:	BC,	Assets and/or incore thentify (e) each asset hald production of incorre and with exceeding \$1,000 at the end of end (b) enly other reportable asset that generated more than \$200 is and (b) enly other reportable asset that generated more than \$200 is during the year. Provide complete names of albo (do not use only 6cker symbole). For all IRAs and other retirent 401(f) plans) provide the value of the account that exceeds the repire that succeed institution when \$1,000 in interest-bearing accounts. If the list every financial institution when \$1,000 in interest-bearing excaunt all interest-bearing excaunt all interest accounts are property, and e-city and state. For rential and other real property provide a complete activate or de property, and e-city and state. For entitle and vecation homes (in a property in a provide and vecation homes (in a property in the reporting perior that is not publicly traded, sin business, the neture of its activities location in Block A. Exclude: Your personel resident homes (in a property in the reporting perior in the reporting perior in the approach of the property in the property in the approach of the instruction of the for a detailed discussion of Schepheasa refer to the instruction to be pleasa refer to the instruction to	
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STAZOM CITITAD		GIERSON RIEGRIC	COLORD PHILLIPS	ACCOUNTS	ON GRESSIANDL FC	ABC Hedge Fund	Simon & Schuster	Mega Corp. Stock	Assets and/or income Sources thentify (e) each asset hald for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) environment of with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) environment of the reporting period, and (b) environment of the reporting period, and (b) environment plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds. For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts. For rental and other real property held for investment, provide a complete address or description, e.g., rental property, and e city and state. For en ownership interest in a privately-held business that is not publicly traded, state the name of the business, the neture of its activities, and its geographic location in Block A. Exclude: Your personal residance, including second homes and vacation homes (unless there were rental income during the reporting period); end any financial interest in, or income derived from, a federal income during the reporting period); end any financial interest in, or income derived from, a federal informent program, including the Thrift Savings Plan. If you report a privately-traded fund that is an Excepted Investment Fund, pisase check the "Ell" box. If you so choose, you may indicate that an asset or income source is that of your spouts (SP) or dependent child (CC), or jointly held with enyons (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	BLOCK A
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	<u> </u>								Amount of Income For assets for which you checked Tax-Deferred in Block C, you may check tha "Yone" column. For all other assets indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, aven if re invested as income for assets held by your apouse or dependent in taxable accounts. Check "None" if no income was semed or generaled. \$1,5200 \$1,001-\$2,500 \$1,001-\$15,000 \$1,001-\$15,000 \$1,001-\$1,5000 \$1,000,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1,000,001-\$1,000,000	
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								S(part)	Transaction Indicate if the easet had purchases (P), sake (S), or exchanges (E) acceeding \$1,000 in the reporting period. If only a portion of an asset was acid, please indicate satis follows: (S (pert)). Leave this count blank if there are no transactions that axcoeded \$1,000.	BLOCK E

SCHEDULE A -- ASSETS & "UNEARNED INCOME"

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Transaction	P, S, S(part), or E																	

Name: Wm. KACYCLAY

Page 3 of 6

SCHEDULE C - EARNED INCOME

Name: Wm LACY CLAY Page Y of 6

List the source, type, and emount of eerned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For a spouse, list the source and amount of any honorena; list only the source for other spouse earned income exceeding \$1,000. See examples below. EXCLUDE: Military pay (such as Nationel Guerd or Reserve pay), federal retirement programs, and benefits received under the Sociel Security Act.

INCOME LIMITS and PROHIBITED INCOME: The 2018 limit on outside earned income for Members and employees compensated at or ebove the "senior staff" rate was \$28,050. The 2019 limit is \$28,440, in addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.	nsated at or ebove the "senior staff" rate was uclary relationship) are totally prohibited.	\$28,050. The 2019 limit is \$28,440.
Source (include date of receipt for honoraria)	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
Examples: State of Maryland (Dr. 2)	Spylise Speech	\$1000 \$1 000
Ontario County Board of Education	Spouse Salary	- N
	LEGYLMAR'S	•
MISSURI STATE RETIREMENT SYSTEM	rension	1090
TREPTMENT IOMMUNITIES OF AMERICA	Space ARARY	NA
		•

SCHEDULE D - LIABILITIES

Name: Why LACK CLAY Page 5 of 6

owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving cherge account (i.e., credit card) only if the belence et the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child. Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report ell liabilities secured by reel property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you are personally liable); and liabilities of a business in which you own an interest (unless you are personally liable); and liabilities

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201		SCHEDING E BOSITIONS													

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompenseted, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in eny religious, sociel, fraternal, or political entities (such es political parties and campaign organizations); and positions solely of an honorery nature.

Position	Name of Organization
DIRECTOR	WM L. CITY SCHOLARSHIP & PLESEBROH FUND
DIRECTOR	PROTECT VOTE AMART
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SCHEDULE F - AGREEMENTS

Name: Wan	
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Page 6	
of 6	

employer. Identify the date, perties to, and general terms of any agreement or errangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferred of payments by a former or current employer other then the U.S. government; or continuing perticipation in an employee welfere or benefit plan meintained by a former

Date	Parties to Agreement	Terms of Agreement
9/11	SESTORMED SHELF INNOSTIW	
	RETIREMENT SYSTEM	MISSOURI STATE LEGISLATORS RETIREMENT
	A CAMPAGE AND A	

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of ell gifts totaling more than \$390 received by you, your spouse, or your dependent child from any source during the yeer. Exclude: Gifts from relatives, gifts of personal hospitality from an Individual (which may not include a registered lobbyist or foreign agent), local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with e value of \$156 or less need not be added towards the \$390 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptence of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Effics.

Source Description Short Short			
Mr. Joseph Smith, Arfington, VA Silver Platter (prior determination of personal friands/tp race) wed from the Committee on Elivics) W/A W/A	Source	Description	Value
N/A		n Ethes)	\$400
		WIA	